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24981 7590 10/05/2005

THE REGENTS OF THE UNIVERSITY OF CALIFORNIA
 LAWRENCE LIVERMORE NATIONAL LABORATORY
 PO BOX 808, L-703
 LIVERMORE, CA 94551-0808

01/06/2006 LW0NDIM2 00000011 120695 09879469

01 FC:2501	700.00 DA
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Kathy Raymond

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09879469

06/12/2001

Todd J. Gable

IL-10789

4354

TITLE OF INVENTION: SPEAKER VERIFICATION SYSTEM USING ACOUSTIC DATA AND NON-ACOUSTIC DATA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO YES	\$1400 700-	\$300	\$1700 \$1,000-	01/05/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
OPSASNICK, MICHAEL N		2655	704-209000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Eddie E. Scott

2 Alan H. Thompson

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Regents of the University of California

Oakland, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

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 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-0695 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date December 20, 2005

Typed or printed name Eddie E. Scott

Registration No. 25,220

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